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Date

Marlen e H. Dortch To: Office of the Secretary Fed eral Communications Commission 445 + 12th Street, SW Was hington, DC 20554

> Irene M. Flannery Vice President - High Cost and Low Income Division Universal Service Administrative Company 2120 L Street, NW, Suite 600 Washington, DC 20037

Re: CC Docket No. 96-45

> Interstate Common Line Support and Long Term Support - ICLS Annual Certification Filing

This is to certify that Trumansburg Telephone Company will use its Interstate Common Line Support and Long Term Support only for the provision, maintenance, and upgrading of facilities and service for which the support is intended.

I am authorized to make this certification on hehalf of the company named above. This certification is for the study area(s) listed below

Company Name	State	Study Area Code
Trumansburg Telephone Company	New York	150131
(If according a place a concern list of additional study areas and s	Land de la Land	

(If necessary, attach a separate list of additional study areas and check this box.)

[Signature of Authorized Representative]

Date: ___ May 2, 2003

Richard E. Faben
[Printed Name of Authorized Representative]

V P Finance

Title of Authorized Representative]

Carrier's Name:

Trumansburg Telephone Company

PO Box 39, 75 Main Street Carrier's Address:

Phelps, NY 14532

Carrier's Telephone Number:

(315) 548-2411

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Date

Marlen e H. Dortch

Office of the Secretary

Federal Communications Commission

445 - 12th Street, SW

Was hington, DC 20554

Irene M. Flannery

Vice President - High Cost and Low Income Division

Universal Service Administrative Company

2120 L Street, NW, Suite 600

Was hington, DC 20037

Re: CC Docker No. 96-45

Interstate Common Line Support and Long Term Support - ICLS

Annual Certification Filing

This is to certify that Ontario Telephone Company will use its Interstate Common Line Support and Long Term Support only for the provision, maintenance, and upgrading of facilities and service for which the support is intended.

I am authorized to make this certification on behalf of the company named above. This certification is for the study area(s) listed below.

Company Nam e	State	Study Area Code
Ontario Telephone Company	New York	150112
		_

(If necessary , attach a separate list of additional study areas and clieck this box.)

Signe d.

[Signature of Authorized Representative]

Date: May 2, 2003

Richard E. Faben

[Printed Name of Authorized Representative]

V P Finance

[Title of Authorized Representative]

Carrier's Address:

Carrier's Name:

Ontario Telephone Company

PO Box 39, 75 Main Street

Phelps, New York 14532

Carrier's Telephone Number:

(315) 548-2411